## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together w...n applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FFE and PUBLICATION FFE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correct maintenance fee notification	correspondence including the delow or directed of attions.	ng the Patent, advance o herwise in Block 1, by (	arders and notification of n a) specifying a new corres	naintenance fees will pondence address; ar	be mailed to the current ad/or (b) indicating a sepa	correspondence address as trate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				c) Transmittal This o	partificate connot be used f	r domestic mailings of the or any other accompanying nt or formal drawing, must
05514		5/2006		Certifi	icate of Mailing or Transi	mission
FITZPATRICI 30 ROCKEFEL NEW YORK, N		ER & SCINTO	I he State addr trans	reby certify that this less Postal Service with ressed to the Mail Semitted to the USPTO	Fee(s) Transmittal is being a sufficient postage for firs top ISSUE FEE address (571) 273-2885, on the d	deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.
						(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR			CONFIRMATION NO.
09/836,163 04/18/2001		William Simpson-Young				
TITLE OF INVENTION	I: TRANSPARENT TEL	ECOMMUNICATIONS	SYSTEM AND APPARA	US		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/16/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
LIN, W	EN TAI	2154	709-228000	1		
1. Change of correspondence address or indication of "Fee Address" (3 CFR 1.363).						
Crit 1.303).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys			
□ "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to			
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			2 registered patent attor listed, no name will be	meys or agents. If no	name is 3	
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	ne)		
PLEASE NOTE: Un recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the part of a substitute for filing an	atent. If an assignee assignment.	is identified below, the do	ocument has been filed for
(A) NAME OF ASSI			(B) RESIDENCE: (CITY			
CANON KABUSHIKI KAISHA Tokyo, Japan						•
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🛭 Corpo	oration or other private gro	up entity Government
4a. The following fee(s)	are submitted:	41	b. Payment of Fee(s): (Plea	se first reapply any p	previously paid issue fee s	shown above)
Issue Fee	Jo emall antitu discount	parmitted)	A check is enclosed.	d Form PTO 2029 in	attachad	
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies5			☐ Payment by credit card. Form PTO-2038 is attached.  ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3939 (enclose an extra copy of this form).			
5. Change in Entity Sta	tus (from status indicate	d above)	overpayment, to Depos	sit Account Number	50-3939 (enclose ar	extra copy of this form).
_ ~ ~ .	s SMALL ENTITY state	•	☐ b. Applicant is no long	ger claiming SMALL	ENTITY status. See 37 CF	FR 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if reqrecords of the United Sta	uired) will not be accepte tes Patent and Trademark	ed from anyone other than the Office.	ne applicant; a registe	red attorney or agent; or th	e assignee or other party in
Authorized Signature	/Edward Kn	nett/		Date Noven	nber 21, 2006	5
Typed or printed nam	e Edward A.	Kmett	Registration No. 42,746			
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this bu (irginia 22313-1450. DC 13-1450.	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est depending upon the indiv the Chief Information Office COMPLETED FORMS TO	etain a benefit by the imated to take 12 min idual case. Any commr, U.S. Patent and Tra THIS ADDRESS. S	public which is to file (and nutes to complete, includin nents on the amount of tin demark Office, U.S. Depa END TO: Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.